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CONFIRMATION NO. 5047

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/573,225	04/23/2008	604	3767	P-5710P2

APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/FR2004/002306 09/10/2004

**** FOREIGN APPLICATIONS *******

FRANCE 0311313 09/26/2003

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

05/16/2008

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance /MD/ Initials	FRANCE	5	6
Verified and Acknowledged	/MARIA E DOUKAS/ Examiner's Signature				1

ADDRESS

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TITLE

Device For Protecting An Injection Apparatus

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